

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JS		8-29-01
O.I.P.E. CLASSIFIER		17	9-10-01
FORMALITY REVIEW	KD	114	10-03-01
RESPONSE FORMALITY REVIEW	T2	947	03/2/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
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